

MAY 12 2008  
FILED

7/18/02

UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF ILLINOIS

MAY 12 2008

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MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURTIN FORMA PAUPERIS APPLICATION  
AND  
FINANCIAL AFFIDAVITJAMES E. MCROY

Plaintiff

v.

MICHAEL F. SHEAHAN, ET AL.

Defendant(s)

08CV 2741

JUDGE CASTILLO

MAGISTRATE JUDGE BROWN

Wherever ☐ is included, please place an X into whichever box applies. Wherever the answer requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT.

I, JAMES E. MCROY, declare that I am the ☒ plaintiff ☐ petitioner ☐ movant (other \_\_\_\_\_) in the above-entitled case. This affidavit constitutes my application ☒ to proceed without full prepayment of fees, or ☒ in support of my motion for appointment of counsel, or ☒ both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Question 2)  
 I.D. # 20020032025 Name of prison or jail: COOK COUNTY DEPARTMENT OF CORRECTION  
 Do you receive any payment from the institution? ☐ Yes ☒ No Monthly amount: NONE.
2. Are you currently employed? ☐ Yes ☒ No  
 Monthly salary or wages: NONE.  
 Name and address of employer: WALGREEN'S  
501 WEST ROOSEVELT ROAD, CHICAGO, ILLINOIS
  - a. If the answer is "No":  
 Date of last employment: APRIL 17, 2002  
 Monthly salary or wages: \$ 35,000  
 Name and address of last employer: WALGREEN'S  
501 WEST ROOSEVELT ROAD, CHICAGO, ILLINOIS
  - b. Are you married? ☐ Yes ☒ No  
 Spouse's monthly salary or wages: NONE.  
 Name and address of employer: NONE.
3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same address received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.
  - a. Salary or wages ☐ Yes ☒ No  
 Amount NONE. Received by NONE.

- b. ☐ Business, ☐ profession or ☐ other self-employment ☐ Yes ☒ No  
Amount NONE. Received by NONE.
- c. ☐ Rent payments, ☐ interest or ☐ dividends ☐ Yes ☒ No  
Amount NONE. Received by NONE.
- d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurance, ☐ disability, ☐ workers' compensation, ☐ unemployment, ☐ welfare, ☐ alimony or maintenance or ☐ child support ☐ Yes ☒ No  
Amount NONE. Received by NONE.
- e. ☒ Gifts or ☐ inheritances ☒ Yes ☐ No  
Amount \$185.00 Received by COOK COUNTY JAIL TRUST FUND DEPARTMENT.
- f. ☐ Any other sources (state source: \_\_\_\_\_) ☐ Yes ☒ No  
Amount NONE. Received by NONE.
4. Do you or anyone else living at the same address have more than \$200 in cash or checking or savings accounts? ☐ Yes ☒ No Total amount: NONE.  
In whose name held: NONE. Relationship to you: NONE.
5. Do you or anyone else living at the same address own any stocks, bonds, securities or other financial instruments? ☐ Yes ☒ No  
Property: NONE. Current Value: NONE.  
In whose name held: NONE. Relationship to you: NONE.
6. Do you or anyone else living at the same address own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? ☐ Yes ☒ No  
Address of property: NONE.  
Type of property: NONE. Current value: NONE.  
In whose name held: NONE. Relationship to you: NONE.  
Amount of monthly mortgage or loan payments: NONE.  
Name of person making payments: NONE.
7. Do you or anyone else living at the same address own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? ☐ Yes ☒ No  
Property: NONE.  
Current value: NONE.  
In whose name held: NONE. Relationship to you: NONE.
8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here ☐ No dependents  
I HAVE TWO KIDS, BRANDON J. McROY, ELEVEN YEARS OLD AND KAILA J. McROY, EIGHT YEARS OLD. SUPPORT NONE SINCE INCARCERATION.



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Transactions

Orders

Exit

20020032025 - MCROY, JAMES E.

**BALANCE: \$2.31**

Stamp	Transaction	Amount	Balance
04/15/2008	RELEASE FUNDS	-0.80	2.31
04/09/2008	ORDER DEBIT	-6.65	3.11
04/09/2008	RELEASE FUNDS	-2.44	9.76
04/04/2008	RETURN CREDIT	12.15	12.20
03/26/2008	ORDER DEBIT	-0.34	0.05
03/19/2008	ORDER DEBIT	-12.15	0.39
03/19/2008	RELEASE FUNDS	-3.70	12.54
03/13/2008	RELEASE FUNDS	-4.07	16.24
03/12/2008	ORDER DEBIT	-0.29	20.31
03/10/2008	CREDIT	20.00	20.60

[Next 10 Records]

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Exit

20020032025 - MCROY, JAMES E.

**BALANCE: \$2.31**

Stamp	Transaction	Amount	Balance
03/05/2008	ORDER DEBIT	-39.40	0.60
02/28/2008	CREDIT →	40.00	40.00
01/09/2008	ORDER DEBIT	-2.20	0.00
01/02/2008	ORDER DEBIT	-11.26	2.20
12/29/2007	RETURN CREDIT	1.56	13.46
12/27/2007	RELEASE FUNDS	-16.24	11.90
12/24/2007	ORDER DEBIT	-21.86	28.14
12/24/2007	CREDIT →	50.00	50.00
10/10/2007	ORDER DEBIT	-24.11	0.00
10/04/2007	ORDER DEBIT	-21.35	24.11

[Previous 10 Records] [Next 10 Records]

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I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: APRIL 16, 2008

James E. McRoy  
Signature of Applicant

JAMES E. McROY  
(Print Name)

**NOTICE TO PRISONERS:** A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account—prepared by each institution where you have been in custody during that six-month period—and you must also have the Certificate below completed by an authorized officer at each institution.

#### CERTIFICATE

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant named herein, McRoy, James, ID.# 20020032025, has the sum of \$ 2.31 on account to his/her credit at (name of institution) Cook County Dept. of Corr.

I further certify that the applicant has the following securities to his/her credit:                     . I further certify that during the past six months the applicant's average monthly deposit was \$ 18.00.

(Add all deposits from all sources and then divide by number of months).

04/16/08

DATE

[Signature]  
SIGNATURE OF AUTHORIZED OFFICER

J. Hampton  
(Print name)